

**UTILITY
PATENT APPLICATION
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	021731-9002
Client Reference No.	
First Inventor	Moshe Konstantine
Title	DUAL PANEL SYSTEM FOR CONTROLLING THE PASSAGE OF LIGHT THROUGH ARCHITECTURAL STRUCTURES
Express Mail Label No.	EV323581766US

17522 U.S. PTO
10/600261
06/20/03



APPLICATION ELEMENTS		ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Arlington, VA 22313-1450																																																		
<p>1. <input checked="" type="checkbox"/> Utility Patent Application Transmittal Form</p> <p>2. <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p>3. <input checked="" type="checkbox"/> Specification (including claims and abstract) [Total Pages 27]</p> <p>4. <input checked="" type="checkbox"/> Drawings [Total Sheets 14]</p> <p>5. <input checked="" type="checkbox"/> Declaration [Total Pages 1]</p> <p>a. <input checked="" type="checkbox"/> Newly executed</p> <p>b. <input type="checkbox"/> Copy from prior application [Note Box 6 below]</p> <p>i. <input type="checkbox"/> <u>Deletion of Inventor(s)</u> Signed statement attached deleting inventor(s) named in the prior application</p> <p>6. <input type="checkbox"/> Incorporation by Reference: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b is considered as part of the disclosure of the accompanying application and is hereby incorporated by reference.</p> <p>7. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p> <p>8. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</p> <p>9. Nucleotide and/or Amino Acid Sequence Submission</p> <p>a. <input type="checkbox"/> Computer Readable Form (CRF)</p> <p>b. Specification Sequence Listing on:</p> <p>i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or</p> <p>ii. <input type="checkbox"/> Paper Copy</p> <p>c. <input type="checkbox"/> Statement verifying identity of above copies</p>		ACCOMPANYING APPLICATION PARTS																																																		
		<p>10. <input type="checkbox"/> Applicant requests early publication. (include publication fee under 37 CFR 1.18(d))</p> <p>11. <input checked="" type="checkbox"/> Assignment Papers (cover sheet and document(s))</p> <p>12. <input type="checkbox"/> 37 CFR 3.73(b) Statement (when there is an Assignee)</p> <p>13. <input type="checkbox"/> Power of Attorney</p> <p>14. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>15. <input type="checkbox"/> Information Disclosure Statement (IDS)</p> <p><input type="checkbox"/> Form PTO-1449</p> <p><input type="checkbox"/> Copies of Listed Documents</p> <p>16. <input type="checkbox"/> Preliminary Amendment</p> <p>17. <input checked="" type="checkbox"/> Return Receipt Postcard (Should be specifically itemized)</p> <p>18. <input type="checkbox"/> Claim of Priority & Certified Copy of Priority Document(s)</p> <p>19. <input type="checkbox"/> Request & Certification Under 35 USC 122(b)(2)(B)(i) (Form PTO/SB/35 or its equivalent must be submitted with this application to prevent publication at 18 months)</p> <p>20. <input type="checkbox"/> Other:</p>																																																		
<p>21. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below:</p> <p><input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part of prior application no. _____</p> <p>Prior application information: _____; Group Art Unit: _____</p>																																																				
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<table border="1"> <thead> <tr> <th colspan="4">BASIC FEE</th> <th style="text-align: right;">\$750.00</th> </tr> <tr> <th>CLAIMS</th> <th>NUMBER FILED</th> <th>NUMBER EXTRA</th> <th>RATE</th> <th></th> </tr> </thead> <tbody> <tr> <td>Total Claims</td> <td>47</td> <td>-20=</td> <td>27</td> <td style="text-align: right;">x \$18.00 \$486.00</td> </tr> <tr> <td>Independent Claims</td> <td>5</td> <td>- 3=</td> <td>2</td> <td style="text-align: right;">x \$84.00 \$168.00</td> </tr> <tr> <td colspan="4"><input type="checkbox"/> Multiple Dependent Claim if applicable</td> <td style="text-align: right;">+\$280.00 \$</td> </tr> <tr> <td colspan="4"></td> <td style="text-align: right;">Total of above calculations = \$1404.00</td> </tr> <tr> <td colspan="4"></td> <td style="text-align: right;">Reduction by 50% for filing by small entity = \$702.00</td> </tr> <tr> <td colspan="4"><input checked="" type="checkbox"/> Assignment fee if applicable</td> <td style="text-align: right;">+ \$40.00 \$40.00</td> </tr> <tr> <td colspan="4"><input type="checkbox"/> Early publication fee if applicable</td> <td style="text-align: right;">+ \$300.00 \$</td> </tr> <tr> <td colspan="4"></td> <td style="text-align: right;">TOTAL = \$742.00</td> </tr> </tbody> </table>			BASIC FEE				\$750.00	CLAIMS	NUMBER FILED	NUMBER EXTRA	RATE		Total Claims	47	-20=	27	x \$18.00 \$486.00	Independent Claims	5	- 3=	2	x \$84.00 \$168.00	<input type="checkbox"/> Multiple Dependent Claim if applicable				+\$280.00 \$					Total of above calculations = \$1404.00					Reduction by 50% for filing by small entity = \$702.00	<input checked="" type="checkbox"/> Assignment fee if applicable				+ \$40.00 \$40.00	<input type="checkbox"/> Early publication fee if applicable				+ \$300.00 \$					TOTAL = \$742.00
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22. Please charge my Deposit Account No. 50-1965 in the amount of \$742.00.

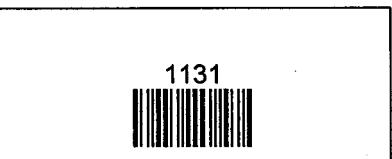
23. Checks in the amount of \$ are enclosed.

24. The Commissioner is hereby authorized to credit overpayments or charge any additional fees of the following types to Deposit Account No. 50-1965:

- Fees required under 37 CFR 1.16.
- Fees required under 37 CFR 1.17.

25. The Commissioner is hereby generally authorized under 37 CFR 1.136(a)(3) to treat any future reply in this or any related application filed pursuant to 37 CFR 1.53 requiring an extension of time as incorporating a request therefor, and the Commissioner is hereby specifically authorized to charge Deposit Account No. 50-1965 for any fee that may be due in connection with such a request for an extension of time.

26. CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number: 1131		<input type="checkbox"/> , Reg. No.
 1131 		Michael Best & Friedrich, LLC 401 North Michigan Avenue Suite 1900 (312) 222-0800 (telephone) (312) 222-0818 (facsimile)
Name	Martin L. Stern, Registration No. 28,911	
Signature		
Date	June 20, 2003	

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